

# Work Order ID 88016

July-23-12 3:08:09 PM

**\*88016\***

Page 1

Item ID: D4305-3

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Item Name: Connector Half

Stop **\*NS2\***

Start Date: 23/07/2012 Start Qty: 4.00

**\*4\***

Cust Item ID:

Required Date: 06/08/2012 Req'd Qty: 4.00

**\*4\***

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 12/07/23

Tooling:

Date:

Run Start **\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plar Cog	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	-------------	---------------	---------------	------------------	----------------

Draw Nbr

Revision Nbr

D4305

X C M

100

0.00

**\*100\***

Purchasing

Memo

0.00

Purchasing

Issue P/O: 12544  
Supplier: AMSAFE P#4181-2031912396  
Material release note required

12-07-24  
EW

110

Receive & Inspect for Damage & Mat'l Certs

0.00

**\*110\***

Packaging

Memo

0.00

Packaging

4x

SP  
12-8-22

120

QC6- Inspect dimensions to drawing

0.00

**\*120\***

QC

Memo

0.00

Quality Control

DAS  
16  
2/20/12

74

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

# Work Order ID 88016

July-23-12 3:08:09 PM

**\*88016\***

Page 2

Item ID: D4305-3

Accept

**\*N9000040100\***

Setup Start

**\*NS1\***

Revision ID:

Item Name: Connector Half

Stop

**\*NS2\***

Start Date: 23/07/2012 Start Qty: 4.00

**\*4\***

Cust Item ID:

Required Date: 06/08/2012 Req'd Qty: 4.00

**\*4\***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Resp.  
Stamp

130

Identify as per dwg & Stock Location: 266

0.00

*SP*

4

8

12/8/23

**\*130\***

Packaging

Memo

0.00

Packaging

140

QC21- Final Inspection Work Order Release

0.00

**\*140\***

QC

Memo

0.00

Quality Control

ML5 12/08/23

ML5 12/08/23

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
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Doc/Data <input type="checkbox"/>												
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Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  _____ _____ _____		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other _____ _____ _____	

# Picklist Print

July-23-12 3:08:13 PM

Page 1

Work Order ID: 88016

\*88016\*

Parent Item: D4305-3

\*D4305-3\*

Parent Item Name: Connector Half

Start Date: 23/07/2012

Required Date: 06/08/2012

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP Rev:A 11.03.01 new issue DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
4181-2031912396		Purchased		No		110	Each	0.0000	1	4			

\*4181-2031912396\*

Connector Half

\*\*

4x SP12-8-22

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

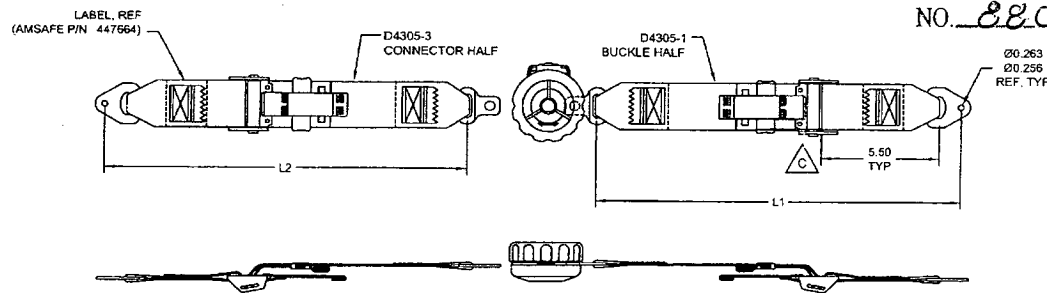
DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

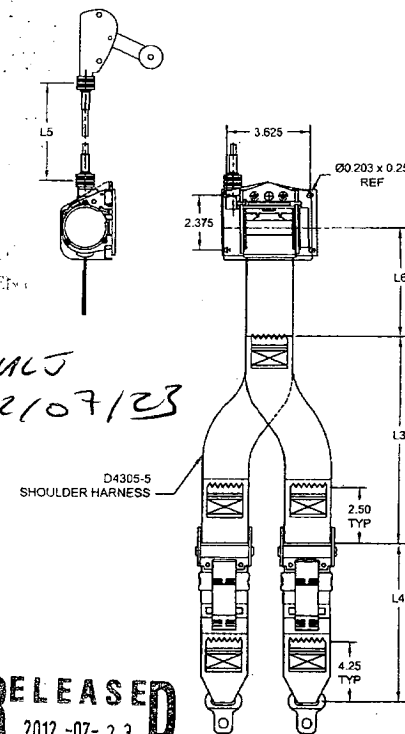
Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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# SPECIFICATION CONTROL DRAWING

DART P/N	VENDOR P/N	DESCRIPTION	VENDOR	L1	L2	L3	L4	L5	L6
D4305-1	4181-2011912396	BUCKLE HALF	AMSAFE	30.00					
D4305-3	4181-2031912396	CONNECTOR HALF	AMSAFE		30.00				
D4305-5	4181-2071912396	SHOULDER HARNESS	AMSAFE			41.00	4.00-22.00	22.00	40.00



SHOP  
RETURN  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER  
NO. 88016 MJS  
12/07/23



**RELEASED**  
2012-07-23

## NOTES:

- 1) PURCHASE: AMSAFE INC. P/N: 4181-2-191-2396  
4 POINT SHOULDER HARNESS WITH BUCKLE ASSEMBLY  
MEETS REQUIREMENTS OF TSO-C114  
CHROME HARDWARE PLATING AND BLACK WEBBING
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: USE PLASTIC ENGRAVED TAGS AND LABEL PER FAR 21.607  
TO CONTAIN THE FOLLOWING AT MINIMUM:  
MANUFACTURER P/N. 4181-2-191-2396  
CUST P/N: D4305-041  
RATED: 3000 LBS DATE OF MFG  
CONFORMS TO FAA TSO-C114
- 7) WEIGHT: 3.36 lbs

## D4305-041 SHOULDER HARNESS

C	5.50 WAS 4.00, L3 WAS 49.00, L4 WAS 4.00 - 26.00	RP	12.07.03
B	REVERSED ORIENTATION OF ADJUSTER ASSEMBLIES ON D4305-1 AND D4305-3. L1 & L2 WERE 24.00. L4 REDEFINED. L3 WAS 15 AND WAS 18.00. L6 ADDED. L5 WAS L6 AND WAS 30.00. UPDATE AMSAFE PART NUMBERS.	RP	12.05.25
A	NEW ISSUE	RF	10.11.26
REV.	DESCRIPTION	BY	DATE
DESIGN	RF		
DRAWN	RP		
CHECKED	A.P.		
MFG. APPR.	U.P.		
APPROVED			
DE APPR.			
DATE	12.07.03		

**DART AEROSPACE LTD**  
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. REV. C  
DSC-D4305 SHEET 1 OF 1  
TITLE SCALE  
SHOULDER HARNESS NTS

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NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
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Doc/Data <input type="checkbox"/>												
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# AmSafe

1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

## INVOICE

Please remit to:  
AmSafe, Inc. #05  
Lockbox #05  
P.O. Box 53075  
Phoenix, AZ 85072-3075

\*\*\* DUPLICATE \*\*\*

Customer No.	Invoice Date	Sales Order Number	Invoice Number	Purchase Order Number	Page No.
10006113	08/21/12	S238944	I276292	PO17544	1

BILL TO: DART AEROSPACE  
1270 ABERDEEN STREET  
HAWKESBURY, ON K6A 1K7  
Canada

SHIP TO: DART AEROSPACE LTD.  
1270 ABERDEEN ST  
HAWKESBURY, ON K6A 1K7  
Canada

SOLD TO: DART AEROSPACE  
1270 ABERDEEN STREET  
HAWKESBURY, ON K6A 1K7  
Canada

REMARKS:  
1517-9324-0

Freight  
COLLECT

### COMMENTS:

8/14/15 CHG: ADDED TOP ASSY TO LINES 1 & 2

TERMS NET30		ORDER DATE 08/10/12	SALESPERSON HEITZMAN		SHIP DATE 08/21/12	SHIP VIA FedEx P1 10:30 AM TRACKING # 537498942642		FOB POINT ORIGIN		
LINE NO.	ITEM	DESCRIPTION		UM	QUANTITY LOT      BACK ORD      SHIPPED			T A X	UNIT PRICE	EXTENDED AMOUNT
1	4181-2031912396	DRAWING: 4181 REV: L CONN HALF ASSY  TOP ASSY P/N 4181-2-191-2396		EA	S238944-1	0.0	4.0	N	72.18 USD	288.72 USD
										SP 12-8-22 TSO-C114
2	4181-2011912396	DRAWING: 4181 REV: L BUCKLE HALF ASSY  TOP ASSY P/N 4181-2-191-2396		EA	S238944-2	0.0	4.0	N	203.42 USD	813.68 USD
										TSO-C114
3	4181-2-191-2396	DRAWING: 4181 REV: L REST SYS ASSY		EA	S238944-3	0.0	8.0	N	656.22 USD	5,249.76 USD
										TSO-C114

Non-Taxable: 6,352.16 USD

Line Total: 6,352.16 USD

Total Taxable:

The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.

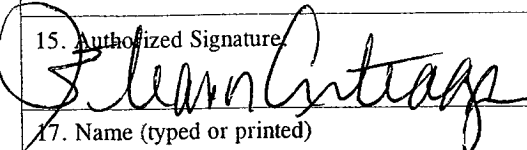
Signature: \_\_\_\_\_

Date: 1 2012  
AUG 21

Phoenix, Arizona, USA

Sales Tax:

Total: 6,352.16 USD

1. Approving National Aviation Authority/Country:  FAA/United States		2. <b>AUTHORIZED RELEASE CERTIFICATE</b> FAA Form 8130-3, AIRWORTHINESS APPROVAL TAG				3. Form Tracking Number:  S238944-1-EA	
4. Organization Name and Address:  AmSafe Aviation 1043 North 47th Avenue Phoenix, Arizona 85043		Cert. No. PT1967NM				5. Work order/Contract/Invoice Number: S238944 - 1 PAGES ATTACHED	
6. Item:	7. Description:	8. Part Number:	9. Eligibility: *	10. Quantity:	11. Serial/Batch Number:	12. Status/Work:	
1	CONN HALF ASSY	4181-2031912396	N/A	4	A0812	NEW	
13. Remarks: Drawing: 4181 Rev: L TSO: TSO-C114  "THIS PART IS A SUBCOMPONENT OF A ISO ARTICLE"  DAS 16 2-83 2/6/22							
EXPORT AIRWORTHINESS APPROVAL: THIS ARTICLE MEETS THE SPECIAL REQUIREMENTS OF CANADA							
14. Certifies the items identified above were manufactured in conformity to:  <input checked="" type="checkbox"/> Approved design data and are in a condition for safe operation  <input type="checkbox"/> Non-approved design data specified in Block 13.				19. <input type="checkbox"/> 14 CFR 43.9 Return to Service <input type="checkbox"/> Other regulation specified in Block 13  Certifies that unless otherwise specified in Block 13, the work identified in Block 12 and described in Block 13 was accomplished in accordance with Title 14, Code of Federal Regulations, part 43 and in respect to that work, the items are approved for return to service.			
15. Authorized Signature: 		16. Approval/Authorization No.: ODA602112NM		20. Authorized Signature		21. Authorized/Certificate No.	
17. Name (typed or printed) Eleanor Arteaga		18. Date (m/d/y): AUG 120102		22. Names (typed or printed)		23. Date (m/d/y):	
<b>User/Installer Responsibilities</b>							
<p>It is important to understand that the existence of this document alone does not automatically constitute authority to install the part/component/assembly. Where the user/installer performs work in accordance with the national regulations of an airworthiness authority different than the airworthiness authority of the country specified in Block 1, it is essential that the user/installer ensures that his/her airworthiness authority accepts parts/components/assemblies from the airworthiness authority of the country specified in Block 1.</p> <p>Statements in Blocks 14 and 19 do not constitute installation certification. In all cases, aircraft maintenance records must contain an installation certification issued in accordance with the national regulations by the user/installer before the aircraft may be flown.</p>							